STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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APR 12 2018

PLEASE PRINT

17762	PLEASE PRINT	/	NEW HAMPSHIRE
I. Name of Lobbyist(s	, Mike Dennehy/	Alex Koutrouh	DEPARTMENT OF STATE
II. Name of lobbyist's	partnership, firm or corporation, if	any:	
(Na	Dennehy & Bo	ouley, LLC	
Business Address: (§	17 Depot	Street	
Business Address. (c	Concord, N	H 03301	(Zip Code)
()(Telephone)	603-228-	1601	
III. This statement co reportable expense tr	vers: (Choose one – file separate repo ansactions which are not attributable	orts for each client, OR you may to any one client).	file a separate report for
All reportable trans	actions occurring in the months prior to	o the reporting date relative to the fo	ollowing client:
	Concard Hospi	fal	C
OR	(Full Name of Client as it appears on the L	obbyist Registration Form)	
	actions by the lobbyist (including the lo	bbyist's family), or the lobbying fir	m listed below which are
IV. Date of Report Reports cover: activity	April 26, 2017 Ty from date of registration to 3/31/17	July 26, 2017	
a	October 25, 2017	January 31, 2018 activity from 10/1/17 to 12/31/17	
V. There have been If this box is checked, c Concord, NH 03301.	no fees received and no reportabl omplete just this form and submit it to t	e transactions made since the line Secretary of State's Office, State	last report. House, Room 204,
	l reports are attached:		
If you have receive	d fees or made expenditures, you must	file Addendum A- Fees and Exper	nses
Expense Reimbursemer	honorarium or reimbursed expenses, y	ou must file Addendum B– Report	of Honorariums or
☐ If you, your firm, o	r your family has made political contrib	outions, you must file Addendum (C- Political Contributions
Sworn Statement/Affin I have read R\$A 15, RS and complete to the best (Signature of lobbyist) (Print Name of lobbyist)	A 15-B, RSA 14-C and RSA 664 and he of my knowledge and belief.	nereby swear or affirm that the foreg	going information is true

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1173	
I. Name of Lobbyist(s) Mike Dennehy Mix	Koutroubas
II. Name of lobbyist's partnership, firm or corporation, if any:	
Dennehy & Bouley LCC (Name of partnership, firm or corporation)	
III. Name of Client Concord Hospital	Date 04/03/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ _ \$, 000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 36,000
c) Total of all fees received to date (Add lines a and b)	c)\$ 44,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to represes. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by hay be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the persor d with a value of \$25.00 or less); and tring period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50 expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$

c) \$ _____

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
································	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. (Signature of lobbyist)	that the foregoing information (Date)
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Dennehy & Boyley US
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): (a) Coo'd Hospital
Date of Report (check one):
April 25, 2018
January 31,2018 [(Q42017)
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
$\frac{\text{(Signature of lobbyist)}}{\text{(Date)}} \qquad \frac{\text{(Date)}}{\text{(Date)}}$
Alex Koutroubas
(Print Name of lobbyist)